ROUTING AND TRANSMITTAL SLIP

Date

TO: (Name, office symbol, room number, building, Agency/Post)	Initials	Date
1. Tom Cubbage		
2. Tom Cosse		
3. Bill Carr Bill Gulley		
4.		
5.		

	Action		File		Note and Return
	Approval		For Clearance		Per Conversation
	As Requested		For Correction		Prepare Reply
	Circulate		For Your Information		See Me
	Comment		Investigate		Signature
	Coordination		Justify		

REMARKS

This looks encouraging — and appropriate — but, let's meet + discuss —. Please contact Tom Secretary Judy Wolley for a Time. ~~Thursday~~ Tuesday at ~~10 pm~~ 9:45 ??) 1/31/80.

DO NOT use this form as a RECORD of approvals, concurrences, disposals, clearances, and similar actions

FROM: (Name, org. symbol, Agency/Post)	Room No.—Bldg.
TLK.	Phone No.

5041-102

OPTIONAL FORM 41 (Rev. 7-76)
Prescribed by GSA
FPMR (41 CFR) 101-11.206

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